DRMS ePermitting Change of Contact

COLORADO
Division of Reclamation, Mining and Safety
Department of Natural Resources

General Information

Submittal Date

11/30/2023

The ePermitting Contact Change form is used to update the contact information for the Permittee, Permitting and/or Inspection contact information.

Administrator Information

Administrator First Name

Karban

Administrator Last Name

Sturges

Administrator Email

sturges@meridmedia.com

Select a Permit Number *

M1982090

Select Contact Type *

Select all that apply

- [x] Permittee Contact
- [x] Permitting Contact
- [x] Inspection Contact
- [x] Additional Annual Fee Contact(s)

Permittee Contact Information

Permittee Company Name

Caldera Mineral Resources, LLC

Name change requires succession of operator application

Salutation	First Name	Middle Initial	Last Name
Mr	Sturges	J	Karban

Address 1

593 110th Ave North

Address 2

City	State	Zip Code
Naples	FL	34108

Telephone #

3107569337

Digits only, no separators

Extension

Fax #

Digits only, no separators

Email Address

skarban@thorinresources.com

Permitting Contact Information

Permitting Company Name

Caldera Mineral Resources, LLC

Salutation	First Name	Middle Initial	Last Name
Mr	Sturges		Karban

Address 1

593 110th Ave North

Address 2

City	State	Zip Code
Naples	FL	34108

Telephone #	Extension	Fax #
3107569337		
Digits only, no separators		Digits only, no separators

Email Address

skarban@thorinresources.com

Inspection Contact Information

Inspection Company Name

Caldera Mineral Resources, LLC

Salutation	First Name	Middle Initial	Last Name
Mr	Sturges		Karban

Address 1

593 110th Ave North

Address 2

City	State	Zip Code
Naples	FL	34108

Telephone #	Extension	Fax #
3107569337		
Digits only, no separators		Digits only, no separators

Email Address

cskerik@thorinresources.com

Annual Fee Notice to Copy

Additional people you would like to receive notices of upcoming annual fee/report due dates

Remove Existing Contact?

☐ Remove

Salutation

First Name *
Chris

Middle Initial

Last Name *
Skerik

Annual Fee Notice Company Name

Address 1
1900 main st

Address 2
unit 1

City

State
CO

Zip Code
81427

Telephone #
9493081651
Digits only, no separators

Extension

Fax #
Digits only, no separators

Email Address
cskerik@thorinresources.com

Confirmation

Have you reviewed all the information provided on this form? *

☑ Yes